## Wings Summer Camp Program 2024

## **APPLICATION FOR EMPLOYMENT - CAMP COUNSELOR**

Please mail completed application to: Wings Community Programs, 1 School ST Wilmington, VT 05363 or email to: katieboyd.wings@gmail.com

Wings Community Programs and the towns of Wilmington and Whitingham are committed to providing an equal employment opportunity to all persons. Assistance in reviewing job opportunities and completing this employment application will be provided to persons with disabilities upon request. Please note you MUST be at least 14 years old to apply.

## **General Information**

First Name					Last Name	Last Name	
Mail	ling Ad	ldress					
City					State	Zip	
Hon	ne Pho	ne			Cell		
Ema	uil:						
Circ	le the i	number	corresp	onding to t	he highest level of education	completed in June 2024:	
Mid	dle/H	igh Scho	ool				
8	9	10	11	12			
					t recent first) all schools atte	nded	
	Name of School Tow				State		

List any special skills that you have that you think would make you a great camp counselor(First Aid, babysitting classes, visual arts, dance, music, games facilitation, etc)

List any specific experience with children or young people:

## Work Experience:

Describe below all previous work experience (including unpaid work experience) in reverse chronological order (present or most recent first).

Name of Employer							
Your job title	Salary (dollars/week):						
Hours/week Employed	d from (mo/year) To						
Supervisor name and title							
Reason for leaving							
May we contact this employer?YesNo Phone							
Summary of your duties and responsibilities (be specific):							
References: Name, Position, Phone nu	mber (No family members, please)						

Tell us why you want to be a camp counselor: